

SUPPLEMENTAL MATERIAL

Appendix:

CURRENT AS Registry Investigators

List of Investigators

Principal Investigators

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List of participating centers and investigators for the CURRENT AS registry

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Japanese Red Cross Otsu Hospital: Takashi Konishi, Toshikazu Jinnai, Kouji Sogabe, Michiya Tachiiri, Yukiko Matsumura, Chihiro Ota

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Shizuoka General Hospital: Genichi Sakaguchi

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Hamamatsu Rosai Hospital: Junichiro Nishizawa

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A clinical event committee

Hirotoishi Watanabe, MD (Kyoto University Graduate School of Medicine); Kenji Nakatsuma, MD (Kyoto University Graduate School of Medicine), Tomoki Sasa, MD (Kishiwada City Hospital)

Data S1.

Definitions of the clinical events

Death was regarded as cardiovascular in origin unless obvious non-cardiovascular causes could be identified. Sudden death was defined as unexplained death in previously stable patients. Any death during the hospitalization for aortic valve replacement or transcatheter aortic valve implantation was regarded as aortic valve procedure-related death. Aortic valve-related death included aortic valve procedure-related death, sudden death, and death due to heart failure related to aortic stenosis. Heart failure hospitalization was defined as hospitalization due to worsening heart failure requiring intravenous drug therapy.

Table S1. Clinical factors associated with sudden death in the non-HD cohort in the univariate and multivariable analyses.

Variables	Unadjusted HR* (95% CI)	P value	Adjusted HR (95% CI)	P value
Prior myocardial infarction	2.95 (1.90-4.43)	<0.001	3.25 (1.59-6.61)	0.001
BMI <22	1.87 (1.26-2.85)	0.002	1.53 (0.98-2.41)	0.06
LVEF <60%	2.71 (1.90-3.85)	<0.001	1.56 (1.04-2.35)	0.03
Vmax ≥5m/s	1.67 (1.002-2.63)	0.049	1.50 (0.91-2.49)	0.11
Symptoms related to AS	2.34 (1.65-3.36)	<0.001	1.40 (0.93-2.12)	0.11
Age ≥80	2.13 (1.47-3.12)	<0.001	1.19 (0.78-1.82)	0.42
Male	1.52 (1.06-2.16)	0.02	1.53 (1.04-2.24)	0.03
TRPG ≥40 mmHg	1.71 (1.09-2.60)	0.02	1.16 (0.69-1.94)	0.58
Any valvular disease (moderate-severe)	1.37 (0.96-1.94)	0.08	1.01 (0.67-1.52)	0.98
Prior symptomatic stroke	1.18 (0.71-1.86)	0.50	0.95 (0.58-1.56)	0.84
Atrial fibrillation or flutter	1.07 (0.70-1.59)	0.75	1.01 (0.66-1.55)	0.95
Chronic lung disease (moderate-severe)	1.18 (0.42-2.60)	0.72	0.82 (0.33-1.99)	0.65
Malignancy currently under treatment	1.47 (0.57-3.07)	0.38	1.01 (0.44-2.36)	0.98
Aortic/peripheral disease	1.06 (0.45-2.12)	0.88	0.79 (0.35-1.74)	0.55
Current smoking	0.84 (0.33-1.75)	0.67	0.94 (0.41-2.19)	0.89
Diabetes on insulin	1.83 (0.86-3.39)	0.11	1.26 (0.60-2.63)	0.54
Coronary artery disease	1.47 (0.998-2.12)	0.052	0.60 (0.33-1.11)	0.10
Anemia	1.87 (1.31-2.69)	<0.001	0.96 (0.65-1.43)	0.85
Hypertension	1.51 (1.004-2.33)	0.048	1.45 (0.94-2.24)	0.09

* Competing risk of death other than sudden death was not taken into account in the univariate

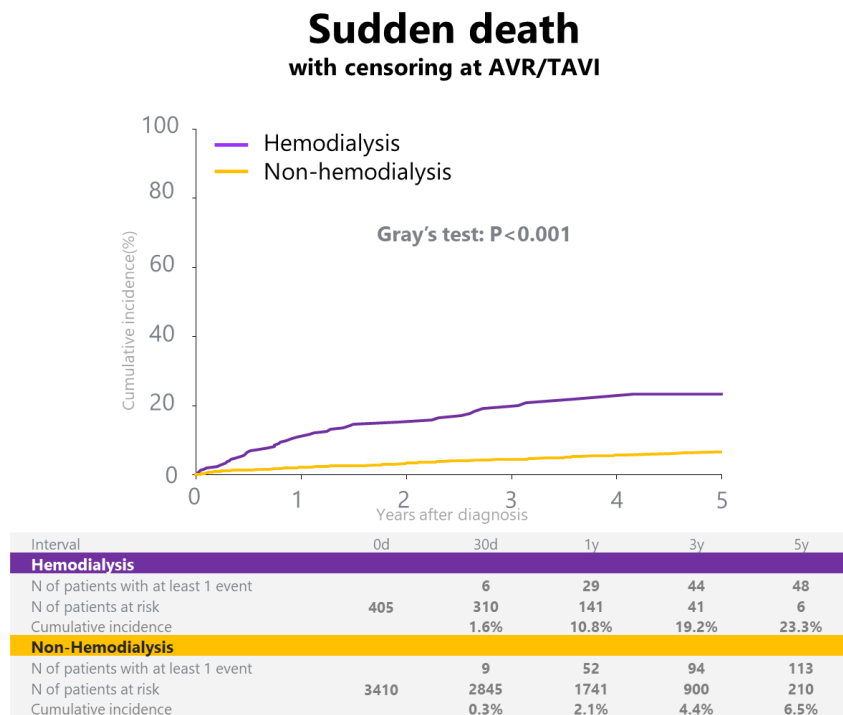
analysis, while it was taken into account in the multivariable analysis. Patients who had AVR or

TAVI were censored at AVR/TAVI.

CI=confidence interval; HR=hazard ratio; TAVI=transcatheter aortic valve implantation. Other

abbreviations were same as in Table 1.

Figure S1. Cumulative incidence of sudden cardiac death in HD and non-HD patients with severe AS.



Cumulative incidence of sudden death was estimated by the Gray method, taking the competing risk of death other than sudden death. AVR=aortic valve replacement; HD=hemodialysis; TAVI=transcatheter aortic valve implantation.